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TRANSMITTAL FORM

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application Number	10/762,075
	Filing Date	January 21, 2004
	First Named Inventor	Joon-seo Son
	Art Unit	2811
	Examiner Name	Samuel A. Gebremariam
Total Number of Pages in This Submission	Attorney Docket Number	3016234 (90066.000371)

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input checked="" type="checkbox"/> Amendment / Reply (total 12 pgs.) <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Technology Center (TC) <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): X Acknowledgment Postcard		
<table border="1"><tr><td>Remarks</td><td>XX Deposit Acct. #50-3010 Deposit Acct Name: Hiscock & Barclay, LLP XX Charge any additional fee(s) or credit any underpayments of fee(s) to Deposit Account 50-3010. Deposit Account Name: Hiscock & Barclay, LLP</td></tr></table>			Remarks	XX Deposit Acct. #50-3010 Deposit Acct Name: Hiscock & Barclay, LLP XX Charge any additional fee(s) or credit any underpayments of fee(s) to Deposit Account 50-3010. Deposit Account Name: Hiscock & Barclay, LLP
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Alpa V. Patel, Esq.
Signature	
Date	September 14, 2006

CERTIFICATE OF TRANSMISSION/MAILING

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